

Work Order ID 108989

Thursday, October 31, 2013 1:09:04 PM

108989

Page 1

Item ID: D4872-1

Revision ID:

Item Name: Light Fixture

Start Date: 10/31/2013 Start Qty: 16.00

Required Date: 11/8/2013 Req'd Qty: 16.00

Reference:

Accept

N900040100Setup Start ***NS1***Stop ***NS2***

Cust Item ID:

Customer:

Approvals: Process Plan: *MF*Date: *13-10-31* Tooling:

Date:

Run Start ***NR1***

QC:

Date: SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D4872

A

100

0.00

100

PURCHASING

Purchasing

Memo

0.00

Purchasing

Issue P/O: *12018*Order from B/E Aerospace
Part Number 2195-51

CERTIFICATION OF CONFORMITY IS REQUIRED

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

Ensure material release note is attached

*11/2/13 MF**Perry 12/5 (2)**Perry 12/12 20 H07*

NCR# 14-3184



NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> Return <input checked="" type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input checked="" type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data				Found when inspecting parts Are not the correct finish Should be Black anodized and Rg all grey in colour.	 14/02/05 Q52012	Return to Supplier Lmg# 350 S2530	14/02/13	DAS 27 J-09 14/2/13	 14/02/05 Q52012
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Turning Sequence	<input checked="" type="checkbox"/> Finish (wrong finish)	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Weld
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Wrong Stock Pulled
			<input type="checkbox"/> Other

Work Order ID 108989***108989***

Page 2

Thursday, October 31, 2013 1:09:04 PM

Item ID: D4872-1

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Light Fixture

Start Date: 10/31/2013 Start Qty: 16.00

16

Cust Item ID:

Required Date: 11/8/2013 Req'd Qty: 16.00

16

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

QC6- Inspect dimensions to drawing

0.00 2.00

120

QC

Memo

0.00

Quality Control

130

Identify as per dwg & Stock Location: _____

0.00

130

Packaging

Memo

0.00

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

20

14/2/13 (20)

DAS
32
9-8914-02-13
ME
14-2-12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

Thursday, October 31, 2013 1:09:04 PM

Page 1

Work Order ID: 108989

Parent Item: D4872-1

Parent Item Name: Light Fixture

Start Date: 10/31/2013

Required Date: 11/8/2013

Start Qty: 16.00

Required Qty: 16.00

Comments: IPP Rev. A New Issue 13/10/01 DL VERF:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
2195-51 Light Fixture		Purchased	No			100	Each	0.0000	1	16			

11/14/13 (20)
11/14/13 (20)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

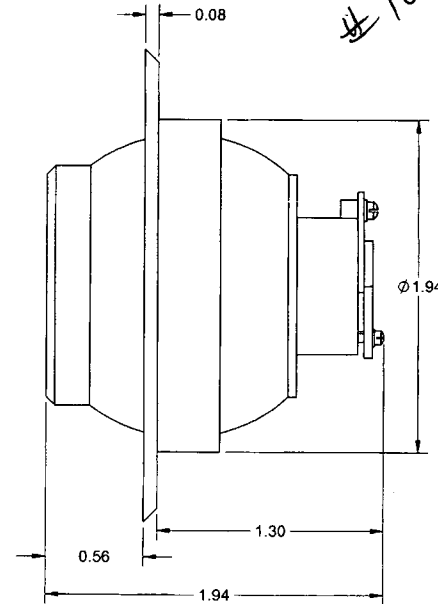
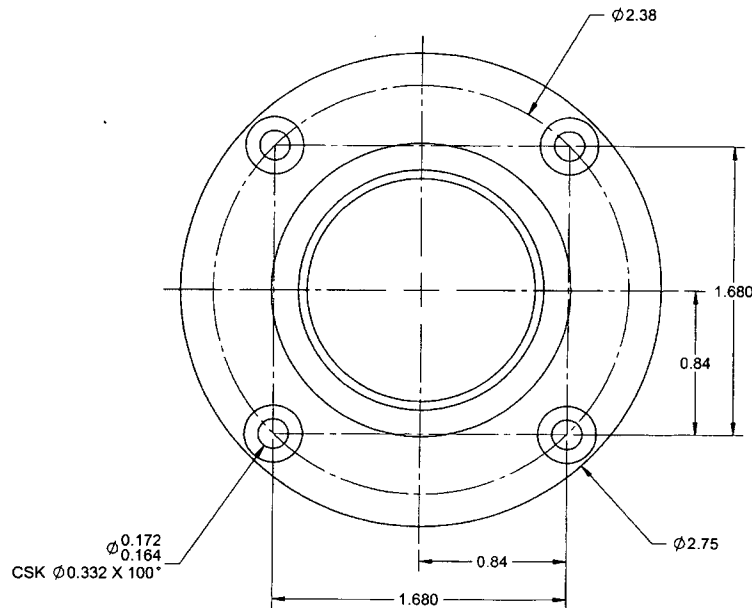
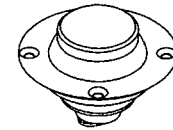
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

SPECIFICATION CONTROL DRAWING

7MF
13-10-31
#108599



DART PART NUMBER	DESCRIPTION	VOLTAGE	CURRENT	VENDOR	VENDOR PART NUMBER	FINISH	WEIGHT (lbs)
D4872-1	LIGHT FIXTURE	24 VDC NOMINAL	300 mAmps MAX	B/E AEROSPACE	2195-51	BLACK ANODIZE	0.19

D4872-1 LIGHT FIXTURE

- NOTES:
- 1) MATERIAL: PER TABLE
 - 2) FINISH: N/A
 - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
 - 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.7
 - 7) WEIGHT: PER TABLE
 - 8) REPLACES GENEVA P/N G10014 AND G12988

RELEASED
2013-09-16

REV.	NEW ISSUE	DESCRIPTION	BY	DATE
DESIGN	OS	DART AEROSPACE USA, INC. KENT, WA		
DRAWN	OS			
CHECKED	PC			
MFG. APPR.	LC			
APPROVED	SH			
DE APPR.		DART AEROSPACE USA, INC.		
DATE	13.06.13	LIGHT FIXTURE		

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NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO22018**

Purchase Order Date 12/11/2013

PO Print Date 12/11/2013

Page Number 1 of 1

Order From :

VU-BE001

B/E AEROSPACE/LIGHTING SYSTEMS
355 KNICKERBOCKER AVE.
BOHEMIA, NEW YORK 11716

Ship To : DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Contact Name

Vendor Phone 631-563-6400 Ext6123

Ship To Contact

Ship To Phone

Ship Via: FedEx PI collect

Ship Acct:

Buyer

Customer POID

Customer Tax # 10127-2607

Terms Net 30

Currency USD

FOB FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	108989	Light Fixture	22/01/2014 No 22/01/2014		20.00	\$277.06	\$5,541.20

Manufactured as per drwaing D4872-1
B108989

Mfg. P/N 2195-51 (black anodized)

NOTE

Please advise if 2 pcs. can be delivered in 4 weeks time.

Line Total: \$5,541.20

PO Total: \$5,541.20

Note: Pricing listed above is as per contract agreement between Dart Aerospace and the respective manufacturer.
No substitution or deviation without consent.
Certificate of Conformity or Material Certification required - YES NO
PST# 6122-5207

Change Nbr:

2

Change Date: 12/11/2013



B/E Aerospace, Inc. Business Jet Group
Aerospace Lighting Corp.
355 Knickerbocker Avenue
Bohemia, NY 11716
(631) 563-6400

SHIPPER

SHIPPER NO: 188590



CUSTOMER NO: DA0009



Page 1 of 2

Account No.: DA0009

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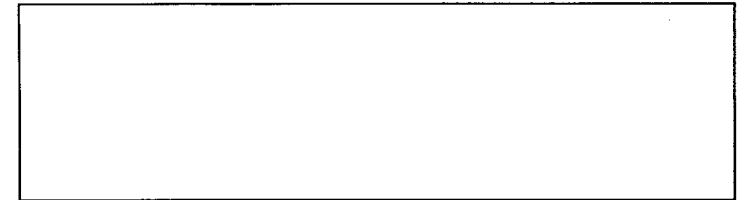
T
O

Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada

S
H
I
P

T
O

Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada



OUR ORDER NO.		YOUR P.O. NO.		F.O.B.	SHIP VIA	TERMS	DATE SHIPPED
 104639		 22018		Bohemia	FP 1517-93240	0.00%/0/30	02-04-2014
ITEM	PRODUCT	DESCRIPTION	ROW/BIN LOCATION	QUANTITY			
				OPEN	B / O	SHIPPED	
1	2195-51	LIGHT ASSY.SPEC.ANODIZE BLACK ANODIZE CERTIFICATE OF CONFORMANCE This is to certify that the parts furnished on this order are new and have been inspected in accordance with B/E AEROSPACE standard procedures. Material and/or parts furnished on this order have been manufactured in accordance with all applicable requirements and specifications as referred to on your order. Data which pertains to this order are available for inspection. By: Authorized Signature.....Date B/E Aerospace must be notified within 30 days of any discrepancies regarding this shipment. Please call 631-563-6400. For lamp breakage, please contact your freight carrier directly. Thank you for your order. If you have any questions or need		20	0	20	
NO. PIECES		WEIGHT	FREIGHT	CUSTOMER'S COPY			



B/E Aerospace, Inc. Business Jet Group
Aerospace Lighting Corp.
355 Knickerbocker Avenue
Bohemia, NY 11716
(631) 563-6400

SHIPPER

SHIPPER NO: 188590



CUSTOMER NO: DA0009



Page 2 of 2

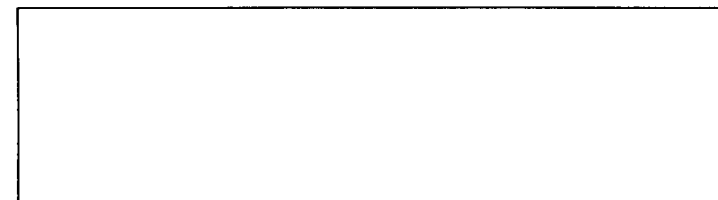
Account No.: DA0009

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Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada

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Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada



OUR ORDER NO.		YOUR P.O. NO.		F.O.B.	SHIP VIA	TERMS	DATE SHIPPED
 104639		 22018		Bohemia	FP 1517-93240	0.00%/0/30	02-04-2014
ITEM	PRODUCT	DESCRIPTION	ROW/BIN LOCATION	QUANTITY			
				OPEN	B / O	SHIPPED	
		any assistance please call us at 631-563-6400. Please remit payment to BE Aerospace Inc. at 88269 Expedite Way Chicago, IL 60695-0001 PLEASE BE ADVISED THAT THIS IS AN ORIGINAL LASER PRINTED DOCUMENT. We Now Accept American Express, Visa & MasterCard for Payment. To Pay this Invoice by Credit Card, please call 631-563-6400					
NO. PIECES		WEIGHT	FREIGHT	CUSTOMER'S COPY			



Non-Conformance Report

Printed on: Wednesday, February 05, 2014

Details			
Raised Date 2/5/2014	Status Open	Owner Gregoire, Michael	Number NCR14-3484
Target Date 2/21/2014	Standard		Severity MAJOR
Process Supplier		Audit	
Raised By Person Downing, Eric M	Raised Against (Department or Supplier) B/E Aerospace		Fault Category Supplier
Details found that parts on PO22018 d4872-1 B108989 found on inspection that they are not black anodize but grey in colour.			
Keywords		Product D4872-1	
Document		Root Cause	
Closed By	Closed Date	Resolution	

Corrective Action			
Target Date 2/21/2014	Owner Downing, Eric M	Closed Date	Closed By
Details			

Actions			
Number	Owner	Target Date	Completed Date
Details		Response	
1	Gregoire, Michael	2/7/2014	
contact supplier and request to return RMA # needed			

Verification & Review			
Target Date	Owner	Closed Date	Closed By
Details			

Actions			
Number	Owner	Target Date	Completed Date



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO22018**

Purchase Order Date 12/11/2013

PO Print Date 12/11/2013

Page Number 1 of 1

Order From :

VU-BE001

B/E AEROSPACE/LIGHTING SYSTEMS
355 KNICKERBOCKER AVE.
BOHEMIA, NEW YORK 11716

Ship To : DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Contact Name

Vendor Phone 631-563-6400 Ext6123

Ship To Contact

Ship To Phone

Ship Via: FedEx PI collect

Ship Acct:

Buyer

Customer POID

Customer Tax # 10127-2607

Terms Net 30

Currency USD

FOB FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
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1	108989	Light Fixture	22/01/2014 No 22/01/2014		20.00 ✓	\$277.06	\$5,541.20
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Manufactured as per drwaing D4872-1
B108989

Mfg. P/N 2195-51 (black anodized)

*****NOTE*****

Please advise if 2 pcs. can be delivered in 4 weeks time.

Pay 2/5 no Black
Pay 2/12

Line Total: \$5,541.20

PO Total: \$5,541.20

Note: Pricing listed above is as per contract agreement between Dart Aerospace and the respective manufacturer.

No substitution or deviation without consent.

Certificate of Conformity or Material Certification required - YES NO

PST# 6122-5207

Change Nbr: 2

Change Date: 12/11/2013

M. Grogan



B/E Aerospace, Inc. Business Jet Group
Aerospace Lighting Corp.
355 Knickerbocker Avenue
Bohemia, NY 11716
(631) 563-6400

SHIPPER

SHIPPER NO: 188905



CUSTOMER NO: DA0009



Page 1 of 2

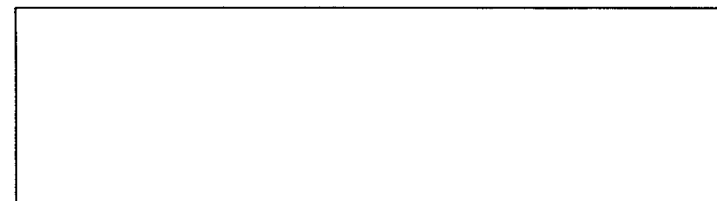
Account No.: DA0009

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Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada

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Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada



OUR ORDER NO.	YOUR P.O. NO.	F.O.B.	SHIP VIA	TERMS	DATE SHIPPED	
 106254	 22018	Bohemia	FP BOHEMIA	0.00%/0/30	02-11-2014	
ITEM	PRODUCT	DESCRIPTION	ROW/BIN LOCATION	QUANTITY		
				OPEN	B / O	SHIPPED
1	2195-51	LIGHT ASSY.SPEC.ANODIZE BLACK ANODIZE FOR SHIPPING PURPOSES ONL CERTIFICATE OF CONFORMANCE This is to certify that the parts furnished on this order are new and have been inspected in accordance with B/E AEROSPACE standard procedures. Material and/or parts furnished on this order have been manufactured in accordance with all applicable requirements and specifications as referred to on your order. Data which pertains to this order are available for inspection. By: Authorized Signature.....Date 2/11/14 B/E Aerospace must be notified within 30 days of any discrepancies regarding this shipment. Please call 631-563-6400. For lamp breakage, please contact your freight carrier directly.		20	0	20
NO. PIECES		WEIGHT	FREIGHT	CUSTOMER'S COPY		



B/E Aerospace, Inc. Business Jet Group
Aerospace Lighting Corp.
355 Knickerbocker Avenue
Bohemia, NY 11716
(631) 563-6400

SHIPPER

SHIPPER NO: 188905



CUSTOMER NO: DA0009



Page 2 of 2

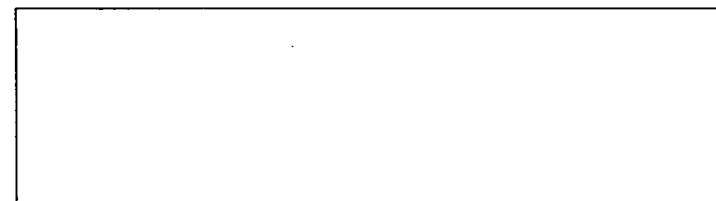
Account No.: DA0009

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Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
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Dart Aerospace Ltd
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Canada



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		<p>Thank you for your order. If you have any questions or need any assistance please call us at 631-563-6400.</p> <p>Please remit payment to BE Aerospace Inc. at 88269 Expedite Way Chicago, IL 60695-0001</p> <p>PLEASE BE ADVISED THAT THIS IS AN ORIGINAL LASER PRINTED DOCUMENT.</p> <p>We Now Accept American Express, Visa & MasterCard for Payment. To Pay this Invoice by Credit Card, please call 631-563-6400</p>				
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